## COMMUNITY CHARITABLE RELIEF PROGRAM

## GOVERNMENT SUBDIVISION CERTIFICATION FORM

Complete a	and submit a separate form for each C	Grantee.	
I,	, having authority to bind		
("Governm	nent Subdivision") certify this and all	of the following to be true:	
1.	The Government Subdivision use	ed funding allocated under this Program only to	
issue award	ds to reimburse Charitable Organizati	ons for expenditures incurred to provide	
COVID-19	related relief to the public, either thr	ough the provision of goods, services, or direct	
payments,	or that lost donation revenue due to C	COVID-19.	
2.	On	_ (date), the Government Subdivision issued an	
award in th	ne total amount of	under this Program to the	
following (	Charitable Organization, with the foll	owing address:	
		_	
		-	
3.	Of the total amount awarded, \$_	was awarded under	
Sections 7(	(a)(iii)(A) and/or (B) of the Program's	s rules to reimburse the Charitable Organization	
for expend	itures incurred in the Organization's	direct provision of goods, services, or cash	
assistance t	to residents within the jurisdiction of	this Government Subdivision to assist with	
COVID-19	and its impacts on the community. S	pecifically, this amount was awarded as a	
reimbursen	ment for the following types of eligible	e expenditures (briefly describe):	
4.	Of the total amount awarded, \$	was awarded under	
Section 7(a	a)(iii)(C) of the Program's rules to rei	mburse the Charitable Organization for	

operational costs of providing goods, services, or direct payments to the public within the					
Government Subdivision in a safe manner given the health risks caused by COVID-19.					
Specifically, this amount was awarded as a reimbursement for the following types of eligible					
expenditures (briefly describe):					
5. [Only permitted if Congress extended the spending deadline of the federal					
CARES Act]. Of the total amount awarded, \$ was awarded under Section					
3 of the Program's rules for eligible losses in donation revenue due to COVID-19. The					
Charitable Organization receiving this award is headquartered in or had its principal operations					
within the Government Subdivision, with more than 50% of the Charitable Organization's work					
ocated in Wyoming and at least 60% of the Charitable Organization's employees employed in					
Wyoming. If this award was issued to a church, it will not cover administrative or personnel					
expenses, and will only cover the costs of providing direct COVID-related goods/services to the					
community. Specifically, this amount was awarded as a reimbursement for the following types of					
eligible losses (briefly describe):					

- 6. The Government Subdivision used funding allocated under this Program only to issue awards to Charitable Organizations that provided COVID-19 related relief to the public, either through the provision of goods, services, or direct payments. Funds will be spent by the Government Subdivision and the Charitable Organization in a manner consistent with all state and federal laws, including the federal Coronavirus, Aid, Relief, and Economic Security Act ("CARES Act") and applicable deadlines.
- 7. The Government Subdivision has complied with all of the Program's rules in issuing awards under this Program and will comply with all reporting requirements. The Government Subdivision will cooperate with any audits, as described in the Program's rules.

8. The Government Subdivision shall repay to the State any Funds not properly distributed. Among any other appropriate method of seeking repayment, the State may recover any improperly used Funds by withholding monies that would otherwise be paid to the Government Subdivision.

9. The Government Subdivision understands that records it submits to the Governor's Office under this Program are subject to the Wyoming Public Records Act and that the total amount of Funds distributed to the Government Subdivision under this Program shall be publicly available on WyOpen.org.

10. The Government Subdivision shall be responsible for responding to any Public Records Requests it receives relating to award decisions made under this Program, according to the applicable law, which includes the Wyoming Public Records Act for counties but not for either Tribe.

Having full authority to act on behalf of the Government Subdivision, I hereby certify that all of the above is true and correct:

Name (Printed):	 
Title:	
Signature:	
Date:	

Within 30 days of issuing an award under this Program to a Charitable Organization, submit this executed form to the Governor's Office at:

ATTN: Erica Legerski 200 West 24th Street Cheyenne, Wyoming 82002